

County of Los Angeles CHIEF EXECUTIVE OFFICE

713 KENNETH HAHN HALL OF ADMINISTRATION LOS ANGELES, CALIFORNIA 90012 (213) 974-1101 http://ceo.lacounty.gov

September 4, 2007

Board of Supervisors GLORIA MOLINA First District

YVONNE B. BURKE Second District

ZEV YAROSLAVSKY Third District

DON KNABE Fourth District

MICHAEL D. ANTONOVICH Fifth District

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

Dear Supervisors:

DEPARTMENT OF TREASURER AND TAX COLLECTOR: REQUEST TO ACCEPT COMPROMISE OFFER OF SETTLEMENT (ALL DISTRICTS AFFECTED) (3 VOTES)

IT IS RECOMMENDED THAT YOUR BOARD:

Pursuant to Section 1473 of the Health and Safety Code, authorize acceptance of the compromise offers of settlement from the following individuals who were injured in a third party compensatory accident and who received medical care at a County facility:

- 1. Account Number 11120150 in amount of \$8,846.00
- 2. Account Number 11374308 in amount of \$10,000.00
- 3. Account Number 11146154 in amount of \$4,842.70
- 4. Account Number 11195154 in amount of \$4,948.00
- 5. Account Number 10831193 in amount of \$53,000.00

PURPOSE /JUSTIFICATION OF RECOMMENDED ACTION

The best interest of the County would be served by the approval of this recommendation and the County Counsel concurs. The compromise offers of settlement are recommended because the patients, estates, or legally responsible relatives are unable to pay the charges.

The Honorable Board of Supervisors September 4, 2007 Page 2

Implementation of Strategic Plan Goals

This action is consistent with the Countywide Strategic Plan Goal of Fiscal Responsibility in pursuing collection of charges owed for County services.

FISCAL IMPACT/FINANCING

The County will recover partial payment from a third party against debts, otherwise uncollectible due to the limited financial resources of the individuals who received the medical care.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Not Applicable.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

No Impact.

Respectfully submitted,

WILLIAM T FUJIOKA Chief Executive Officer

WTF:LN:MJS LM:dc

Attachments (5)

c: Auditor-Controller County Counsel

Comp.94.bl

Reviewed by:

RAYMOND G. FORTNER, JR.

County Counsel

Deputy County Counsel

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 94A

Amount of Aid	\$48,656.00	Account Number	11120150
Amount Paid	0.00	Name	Adult Female
		Service	
Balance Due	48,656.00	Date	09/24/04 thru 10/02/04
Compromise Amount Offered	8,846.00	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$39,810.00	Туре	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus automobile accident. She was treated at LAC USC Medical Center at a cost of \$48,656.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$30,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$10,000.00	\$ 9,930.00	33.10%
Attorney Cost	210.00	210.00	0.70%
Wilmore Premier Health Group	6,390.00	1,153.00	3.84%
County of Los Angeles	48,656.00	8,846.00	29.49%
Net to Client	N/A	9,861.00	32.87%
Total	\$65,256.00	\$30,000.00	100.00%

Our financial investigation reveals that the client is unemployed and receives support from her adult daughter. She has no other source of income or tangible assets.

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 94B

Amount of Aid	\$200,054.00	Account Number	11374308
Amount Paid	0.00	Name	Adult Male
Dalamas Due	200 054 00	Service	12/12/06 thru 02/06/07
Balance Due	200,054.00	Date	12/12/06 tillu 02/06/07
Compromise			
Amount Offered	10,000.00	Facility	Harbor UCLA Medical Center
Amount to be		Service	
Written Off	\$190,054.00	Type	Inpatient/Outpatient

JUSTIFICATION

The client was in an automobile versus pedestrian accident. He was treated at LAC USC Medical Center at a cost of \$200,054.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$30,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 10,000.00	\$10,000.00	33.33%
County of Los Angeles	200,054.00	10,000.00	33.33%
Net to Client	N/A	10,000.00	33.34%
Total	\$210,054.00	\$30,000.00	100.00%

Our financial investigation reveals that this client is unemployed and receives Social Security Disability benefits and financial assistance from his parents. He has no other source of income or tangible assets.

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 94C

		Account	
Amount of Aid	\$24,328.00	Number	11146154
Amount Paid	0.00	Name	Adult Female
		Service	
Balance Due	24,328.00	Date	04/02/06 thru 04/05/06
Compromise			
Amount Offered	4,842.70	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$19,485.30	Туре	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus automobile accident. She was treated at LAC USC Medical Center at a cost of \$24,328.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 4,864.10	\$ 4,864.10	32.43%
Attorney Cost	407.72	407.72	2.72%
Bay Area Credit for Ambulance Serv.	107.29	21.38	0.14%
County of Los Angeles	24,328.00	4,842.70	32.28%
Net to Client	N/A	4,864.10	32.43%
Total	\$29,707.11	\$15,000.00	100.00%

Our financial investigation reveals that the client is unemployed and is supported by her mother. She has no other source of income or tangible assets.

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 94D

Amount of Aid	\$32,360.00	Account Number	11195154
Amount Paid	0.00	Name	Adult Female
Balance Due	32,360.00	Service Date	12/22/05 thru 03/06/06
Compromise Amount Offered	4,948.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$27,412.00	Service Type	Inpatient/Outpatient

JUSTIFICATION

The client was involved in an automobile versus pedestrian accident. She was treated at LAC USC Medical Center at a cost of \$32,360.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement.

		Proposed	Percent of
Disbursements	Total Claim	Settlement	Settlement
Attorney Fees	\$ 5,000.00	\$ 4,948.00	32.99%
Attorney Cost	156.00	156.00	1.03%
County of Los Angeles	32,360.00	4,948.00	32.99%
Net to Client	N/A	4,948.00	32.99%
Total	\$37,516.00	\$15,000.00	100.00%

Our financial investigation reveals that the client supports herself and daughter with a marginal income. She has no other source of income or tangible assets.

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 94E

Amount of Aid	\$78,116.00	Account Number	10831193
Amount Paid	0.00	Name	Adult Female
Balance Due	78,116.00	Service Date	04/14/04 thru 05/03/04
Compromise Amount Offered	53,000.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$25,116.00	Service Type	Inpatient /Outpatient

JUSTIFICATION

The client was involved in a pedestrian versus shopping cart accident. She was treated at LAC USC Medical Center at a cost of \$78,116.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$200,000.00 and proposes the following disbursement:

		Proposed	Percent of
Disbursements	Total Claim	Settlement	Settlement
Attorney Fees	\$ 80,000.00	\$ 80,000.00	40.00%
Attorney Cost	3,105.00	3,105.00	1.55%
Good Samaritan Hospital	6,703.60	4,469.00	2.23%
Wilshire Catalina Medical	3,851.00	2,568.00	1.28%
H&M Orthopedic & Rehabilitation	2,243.00	1,565.00	0.78%
Badenner Chiropractic	6,057.00	4,040.00	2.02%
County of Los Angeles	78,116.00	53,000.00	26.50%
Net to Client	N/A	51,253.00	25.64%
Total	\$180,075.60	\$200,000.00	100.00%

Our financial investigation reveals that the client is unemployed and receives Social Security benefits and support from her son. She has no other source of income or tangible assets.